### **ACCREDITATION COUNCIL FOR PHARMACY EDUCATION**



### **INTERIM REPORT ACTION DOCUMENT**

January 22-25, 2020

Professional Program Leading to the Doctor of Pharmacy Degree

UNIVERSITY OF LOUISIANA AT MONROE

COLLEGE OF PHARMACY

MONROE, LOUISIANA

<u>Current Accreditation Term</u>: Through June 30, 2022 (comprehensive review 2021-2022).

### Summary of Standards Addressed in the Interim Report, dated October 15, 2019:

Standard	Status Before Report	Status After Report
8: Organization and	Compliant with	Compliant with
Governance	monitoring	monitoring
10: Curriculum Design,	Compliant with	Compliant
Delivery and Oversight	monitoring	
11: Interprofessional	Compliant with	Compliant
Education	monitoring	
18: Faculty and Staff –	Compliant with	Compliant with
Quantitative Factors	monitoring	monitoring
23: Financial Resources	Compliant with	Compliant with
	monitoring	monitoring
24: Assessment Elements	Compliant with	Compliant
I: Educational Outcomes	monitoring	

**Administrative Changes**: None reported.

# Monitoring requested by the ACPE Board for the Interim Report, by Standard (with Board Comments in italics):

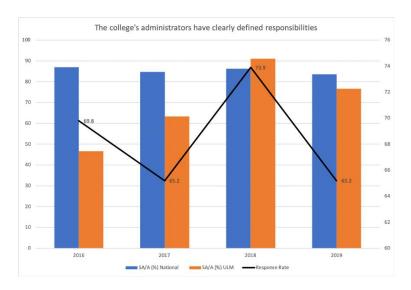
#### Standard No. 8: Organization and Governance

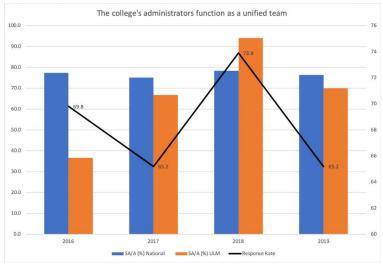
A brief description of the effectiveness of the new COP organizational structure in advancing School initiatives and establishing collaborative relationships with the CHS.

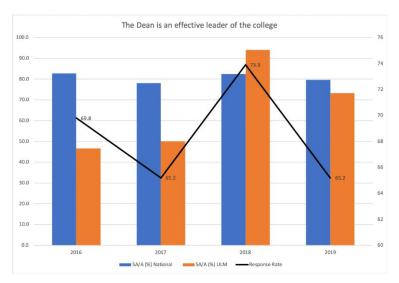
**Comments:** The Board acknowledges the data from recent administrations of the AACP Faculty Survey as provided in the submitted report including the three figures below. The Board notes the College's discussion that the observed fluctuations are understandable given the degree of change experienced by the faculty in recent years. Efforts to strengthen the leadership team's development are noted. The recent downward trend across all three questions gives the Board pause. The College is encouraged to continue to evaluate and address faculty perceptions regarding the organizational effectiveness of the administrative team.

The Board notes that the College's leadership has completed the initial phase of the refinement of the program's mission and vision and development of an updated strategic plan.

The College of Health Sciences is currently under interim leadership. The College of Pharmacy is reminded to promptly notify ACPE upon identification of new leadership for the College of Health Sciences.







#### Standard No. 10: Curriculum Design, Delivery, and Oversight

□ A **detailed description** of the progress made toward implementation and evaluation of the revised curriculum, along with any changes made based on assessment data.

**Comments:** The Board notes that assessment findings including CQI reviews, root cause analysis of NAPLEX scores and faculty and student feedback, have been used to identify needed curricular refinements. Stepwise implementation of the revised curriculum began in fall 2017 with reorganization of the therapeutics sequence. A mandatory six-semester Personal Growth and Development Series was implemented in fall 2018. Modifications implemented in fall 2019 included a P4 Capstone course. Additionally, the Integrated Lab Sequence was revised to address IPPE and APPE readiness.

#### Standard No. 11: Interprofessional Education (IPE)

□ A **detailed description** of full IPE plan implementation, including outcomes, resources, timeline, assessment and tools utilized.

Comments: The Board notes that the College's IPE plan has been implemented along with enhancements including the addition of physicians and medical students to the third-year encounter, restructuring the P2 encounter from an online forum to a half-day active learning exercise and creation of a Co-College IPE Committee. Additional IPE collaborations with medicine are expected following opening of the Edward Via College of Osteopathic Medicine in fall 2020. Resources to support the College's IPE plan are noted including external grant funding received by the program. The College is encouraged to continue to evaluate assessment data collected via the various measures and implement additional improvements as needed.

#### Standard No. 18: Faculty and Staff – Quantitative Factors

- □ A **brief description** of the status of open positions including the regional dean and endowed chair positions.
- □ A **brief description** of any additional faculty turnover since the October 2018 Interim report.

Comments: The Board notes that from the six open positions in October 2018 (one pharmaceutical sciences, five clinical sciences) four were deemed nonessential based on workload analysis and permanently defunded during the budgeting process for FY2020. Two new resignations were received since May 2019 leading to four open positions. Two searches for the Regional Dean for the New Orleans clinical site were deemed not successful and the position remains open. The Tom and Mayme Scott Endowed Chair for Clinical Research has been split into two endowed positions with the new endowed position (the Tom and Mayme Scott Endowed Chair for Pharmacy Excellence) tied to the position of Dean.

#### Standard No. 23: Financial Resources

□ A **detailed description** of any adjustments made to the School budget to meet programmatic needs and address future faculty merit increases.

**Comments:** The Board notes that the plan to move faculty raises to the general fund by FY2019 has not been possible. The College and University continue to work towards identifying a long-term solution to the financial challenges facing the program. Changes to the state's formula funding model have been proposed and will be phased in over the next two fiscal years. The effects of the revised model will be monitored with annual revisions to the pro forma. Once current challenges have been addressed the College will proceed with implementation of the salary revision plan.

In the short term, the state approved a onetime distribution of \$2 million to address College and University needs.

#### Standard No. 24: Assessment Elements for Section I: Educational Outcomes

□ A **brief description** of the progress made toward implementation of the initiatives prompted by the NAPLEX root cause analysis.

**Comments:** The Board notes that the root cause analysis conducted in 2017 indicated that the College's NAPLEX review material was of poor quality and in need of improvements. Based on recommendations from the NAPLEX task force the College changed to RxPrep for review materials and courses. Additionally the College has moved to review all course content to ensure currency of information and efforts have been implemented to ensure incorporation of recommended teaching and testing techniques.

#### **Board Action:**

- □ The Board affirms accreditation of the PharmD program through <u>June 30</u>, **2022**.
- □ An Interim Report should be submitted by <u>October 1, 2020</u>, that includes:

#### Standard No. 8: Organization and Governance

□ A **copy** of the most recent AACP Faculty Survey Data and an <u>action plan</u> to address any issue noted therein.

#### Standard No. 18: Faculty and Staff - Quantitative Factors

A brief description of the quantitative strength of the faculty including the College's progress towards filing the open positions including the regional dean and endowed chair positions and a description of any additional faculty turnover since the October 2019 Interim report.

### Standard No. 23: Financial Resources

□ A **detailed description** of any adjustments made to the College budget including progress towards implementing the salary revision plan.